

## THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3

59 East 4th Street - New York, NY 10003 Phone (212) 533-5300 - Fax (212) 533-3659 www.cb3manhattan.org - info@cb3manhattan.org

Jamie Rogers, Board Chair

Susan Stetzer, District Manager

Dear Applicants, Lawyers, Architects, and others who represent liquor license applicants,

Community Board 3 has received your notification of an application for a new or alteration liquor license. Your request has been placed on the agenda of the next meeting of the SLA (State Liquor Authority) & DCA (Department of Consumer Affairs) Licensing Committee of Community Board 3. This committee will meet on

Monday, August 22, 2016 at 6:30pm Community Board 3 Office 59 East 4th Street (btwn 2nd Ave & Bowery)

Please see text of email invite for due date and directions on how to submit the questionnaire.

- Submit completed questionnaires (<u>with requested diagrams</u>) to the Community Board office by the due date listed in the email invite. 6 copies (double sided) plus additional requested information should be <u>brought to the meeting</u>, including copies of petitions circulated and proof of conspicuous posting of Community Board 3 notices at the site for 7 days prior to the meeting (please include newspaper with date in photo). Please read questionnaire instructions carefully.
- Please inform the office of withdrawals by Friday noon before the Committee meeting. Notice must be in writing by fax, e-mail, or letter stating that applicant will not file with the SLA until they appear before the Community Board. Applicant must submit a new notice to the Community Board to be included on agenda for a meeting at later date.
- Note that withdrawn applications <u>will not be rolled over</u> to next month as stated in previous paragraph.
- Applications without completed information <u>including</u> petitions and proof of posting will not be heard at the committee meeting.
- Please note that the applicant must be present.

Susan Stetzer

Thank you for your help and cooperation. If there are any questions, please call the office.

Sincerely,

Susan Stetzer District Manager



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## **Community Board 3 Liquor License Application Questionnaire**

Please bring the following items to the meeting:

NO	TE: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED.	
	Photographs of the inside and outside of the premise.	
	Schematics, floor plans or architectural drawings of the inside of the premise.	
	A proposed food and or drink menu.	
	Petition in support of proposed business or change in business with signatures from	
	residential tenants at location and in buildings adjacent to, across the street from and behind	
	proposed location. Petition must give proposed hours and method of operation. For example:	
_	restaurant, sports bar, combination restaurant/bar. (petition provided)	
	Notice of proposed business to block or tenant association if one exists. You can find	
	community groups and contact information on the CB 3 website:	
_	http://www.nyc.gov/html/mancb3/html/communitygroups/community group listings.shtml Photographs of proof of conspicuous posting of meeting with newspaper showing date.	
	If applicant has been or is licensed anywhere in City, letter from applicable community board	
_	indicating history of complaints and other comments.	
	mulcating instory of complaints and other comments.	
Che	ck which you are applying for:	
	iew liquor license  alteration of an existing liquor license  corporate change	
Che	ck if either of these apply:	
	ale of assets upgrade (change of class) of an existing liquor license	
Tod	lay's Date:	
T.C		
	pplying for sale of assets, you must bring letter from current owner confirming that you	
	buying business or have the seller come with you to the meeting.	
Is location currently licensed? ■ Yes ■ No Type of license:		
If al	teration, describe nature of alteration:	
Prev	vious or current use of the location:	
Cor	poration and trade name of current license:	
A DE	OLICANIT.	
	PLICANT:	
Prei	mise address:	
Cros	ss streets:	
Name of applicant and all principals:		
Tra	da nama (DRA):	

Revised: March 2015 Page 1 of 4

PREMISE:
Type of building and number of floors:
Will any outside area or sidewalk cafe be used for the sale or consumption of alcoholic beverages? (includes roof & yard) □ Yes □ No If Yes, describe and show on diagram:
Does premise have a valid Certificate of Occupancy and all appropriate permits, including for any back or side yard use? ■ Yes ■ No What is maximum NUMBER of people permitted?
Do you plan to apply for Public Assembly permit? ■ Yes ■ No
What is the zoning designation (check zoning using map: <a href="http://gis.nyc.gov/doitt/nycitymap/">http://gis.nyc.gov/doitt/nycitymap/</a> -
please give specific zoning designation, such as R8 or C2):
DDODOCED METHOD OF ODED ATION.
<b>PROPOSED METHOD OF OPERATION:</b> Will any other business besides food or alcohol service be conducted at premise? □ Yes □ No
If yes, please describe what type:
What are the proposed days/hours of operation? (Specify days and hours each day and hours of outdoor space)
Number of tables? Total number of seats?
How many stand-up bars/ bar seats are located on the premise?
(A <b>stand up bar</b> is any bar or counter (whether with seating or not) over which a patron can order,
pay for and receive an alcoholic beverage)
Describe all bars (length, shape and location):
Does premise have a full kitchen □ Yes □ No?
Does it have a food preparation area? □ Yes □ No (If any, show on diagram)
Is food available for sale? ■ Yes ■ No If yes, describe type of food and submit a menu
What are the hours kitchen will be open?
Will a manager or principal always be on site? □ Yes □ No If yes, which?
How many employees will there be?
Do you have or plan to install □ French doors □ accordion doors or □ windows?
Will there be TVs/monitors? ■ Yes ■ No (If Yes, how many?)
Will premise have music? □ Yes □ No

Revised: March 2015 Page 2 of 4

If Yes, what type of music? □ Live musician □ DJ □ Juke box □ Tapes/CDs/iPod
If other type, please describe
What will be the music volume? □ Background (quiet) □ Entertainment level
Please describe your sound system:
Will you host any promoted events, scheduled performances or any event at which a cover fee is
charged? If Yes, what type of events or performances are proposed and how often?
How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. (Please do not answer "we do not anticipate congestion.")
Will there be security personnel? ■ Yes ■ No (If Yes, how many and when)
How do you plan to manage noise inside and outside your business so neighbors will not be affected? Please attach plans.
Do you have sound proofing installed? □ Yes □ No If not, do you plan to install sound-proofing? □ Yes □ No
APPLICANT HISTORY:
Has this corporation or any principal been licensed previously? ☐ Yes ☐ No
If yes, please indicate name of establishment:
Address: Community Board #
Dates of operation:
If you answered "Yes" to the above question, please provide a letter from the community
board indicating history of complaints or other comments.
Has any principal had work experience similar to the proposed business? $\square$ Yes $\square$ No $\:$ If Yes, please
attach explanation of experience or resume.
Does any principal have other businesses in this area? ☐ Yes ☐ No If Yes, please give trade name and describe type of business
Has any principal had SLA reports or action within the past 3 years? ■ Yes ■ No If Yes, attach list of violations and dates of violations and outcomes, if any.

Attach a separate diagram that indicates the location **(name and address)** and total number of establishments selling/serving beer, wine (B/W) or liquor (OP) for 2 blocks in each direction. Please indicate whether establishments have On-Premise (OP) licenses. Please label streets and avenues and identify your location. Use letters to indicate **B**ar, **R**estaurant, etc. The diagram must be submitted with the questionnaire to the Community Board before the meeting.

Revised: March 2015 Page 3 of 4

	CATION:	
How many licensed establishments are within 1 block?		
	w many On-Premise (OP) liquor licenses are within 500 feet?	
Is p	oremise within 200 feet of any school or place of worship? □ Yes □ No	
<b>COMMUNITY OUTREACH:</b> Please see the Community Board website to find block associations or tenant associations in the immediate vicinity of your location for community outreach. Applicants are encouraged to reach out to community groups. Also use provided petitions, which clearly state the name, address, license for which you are applying, and the hours and method of operation of your establishment at the top of each page. (Attach additional sheets of paper as necessary).		
We are including the following questions to be able to prepare stipulations and have the meeting be faster and more efficient. Please answer per your business plan; do not plan to negotiate at the meeting.		
1.	□ I agree to close any doors and windows at 10:00 P.M. every night?	
2.	□ I will not have □ DJs, □ live music, □ promoted events, □ any event at which a cover fee is charged, □ scheduled performances, □ more than DJs/ promoted events per, □ more than private parties per	
3.	☐ I will play ambient recorded background music only.	
4.	□ I will not apply for an alteration to the method of operation agreed to by this stipulation without first coming before CB 3.	
5.	☐ I will not seek a change in class to a full on-premise liquor license. Or ☐ my business plan is to seek an upgrade at a later date.	
6.	☐ I will not participate in pub crawls or have party buses come to my establishment.	
7.	☐ I will not have a happy hour. Or ☐ Happy hour will end by	
8.	☐ I will not have wait lines outside. ☐ There will be a staff person outside to monitor sidewalk crowds and ensure no loitering.	

Revised: March 2015 Page 4 of 4

9. Residents may contact the manager/owner at the following phone number. Any complaints will be addressed immediately and I will revisit the above-stated method of operation if

necessary in order to minimize my establishment's impact on my neighbors.